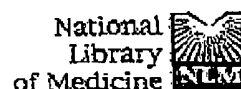


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1: Eur J Med Res. 1995 Dec 18;1(3):153-6.

Related Article

Use of granulocyte colony-stimulating factor (filgrastim) in the treatment of non-cytotoxic drug-induced agranulocytosis.

Wickramanayake PD, Scheid C, Josting A, Katay I, Schulz A, Diehl V.

First Department of Internal Medicine, University of Cologne, Germany.

Five patients with non-cytotoxic drug-induced agranulocytosis were treated with recombinant human granulocyte-colony-stimulating factor (rh-G-CSF). The involved were dipyrrone, captopril, clozapine and carbimazole. Bone marrow examination revealed a depleted granulopoiesis with normal erythro- and megakaryocytopoiesis. After discontinuation of the suspected drug, rh-G-CSF administered daily at 5 microg/kg subcutaneously. The neutrophil counts were recovered between day 6 and 12 and patients were discharged from hospital afterwards. Compared to data from the literature, the neutrophil recovery appeared to be faster than expected without the use of haematopoietic growth factors. In conclusion, rh-G-CSF at a standard dose of 5 microg/kg seems to be an effective treatment for drug-induced agranulocytosis.

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